

On lodging an equity request to cross the state border (without registration)

- Information in relation to the ...
- Determining the addressed...
- Uploader
- Contact information of the...
- Information and statement
- Assistance to completing t...
- Information of the request
- Additional information in the...
- Uploading persons entering t...

Information in relation to the request, Information and statement

**Attention, the form is more than one page.**  
 When finished with filling out a page, please click on the *next page* button on the left to move forward (on this page **Information of the request** is the next page). You are going to find assistance at the bottom of the page. To navigate to the bottom of the page use the scrollbar

Form ID: COVID-02      Name of form: Méltányossági kérelem beutazáshoz (bejelentkezés nélkül) / On lodging an equity request to cross the state border (without registration)

Determining the addressed authority based on the point of entry

\* Point of entry:  ▾  
Start typing the point of entry and choose from the drop-down list

\* Responsible authority:       \* Authority KÉR Address:   
This field is automatically filled based on the point of entry.

Uploader

Name, title	* Current family name	* Current first name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Birth name, title	* Family name (given at birth)	* First name (given at birth)
<input type="text"/>	<input type="text"/>	<input type="text"/>
	* Place of birth	* Date of birth
	<input type="text"/>	<input type="text"/>
Mother's name, title	* Mother's name – Family name	* Mother's name – First name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact information of the uploader

Communications is primarily done in email!  
 For faster administration please give an email address that you regularly check.

\* Phone number:       \* E-mail address:       \* E-mail address confirmation:

Information and statement

Data protection information can be downloaded [here](#).

\* Statement on reading the data protection information  
 I have read (and understood the content) of the data protection information in relation to this form

\* Declaration on acceptance of service regulations  
 By submitting the form I declare that I have read and accepted the administrative service regulation with the submission of the electronic form of the Police

To view the electronic administration service regulation [click here](#).

Assistance to completing the form

Choose the following option to continue on the navigation bar on the left:

A kérelem adatai / Information of the request

✓ **Please select:**

- Dr. (1)
- Dr. Dr. (2)
- Dr. Pr. (3)
- Id. (4)
- Senior Dr (5)
- Jr. (6)
- Jr. Dr. (7)
- widow (8)
- widow Dr. (9)
- Pr. Dr. (10)
- Prof (11)

Please press the button below to proceed. **Finalize**



**nova** COVID-02 English

On lodging an equity request to cross the state border (without registration)

Information in relation to the ...

**Information of the request**

Basic information of the request

Additional information in the ...

Uploading persons entering t...

2 of 4

**Basic information of the request**

\* Basic information of the request  
On behalf of relatives living in the household and himself/her

\* Purpose of entering  
Fulfillment of education or exam obligation on the basis of the student status, if this is certified by a certificate

\* Detailed request

\* Date of entry

\* Way of entry  
Please select:

\* Types of attached documents

Death Certificate  
 Wedding Certificate  
 Birth certificate

Use the scrollbar to choose further documents

To upload an attachment please scroll to the bottom of the page and click *New Upload*.

Number of entering persons  
2

Choose the following option to continue on the navigation bar on the left:

A kérelem további adatai hozzátartozók beutazása esetén / Additional information on the request in the case of entering relatives

The Certificate of Study  
for Freshers  
is the Admission Letter.

Please press the button below to proceed.

**Finalize**



**nova** COVID-02 English

On lodging an equity request to cross the state border (without registration)

Information in relation to the ... **Additional information in the case of entering relatives**

Information of the request

**Additional information in the ...**

Address of entering persons

Additional information of ...

Uploading persons entering t...

3 of 4

**Address of entering persons**

**Country**

\* Country

Based on the chosen country you must fill out one of the following blocks.

**Providing hungarian address**

\* Postal Code \* Municipality \* County \* District

\* Public Address \* Type of Public Address \* House number

Building Stairway Floor Door \* Land-register reference

Other marking

**Providing address abroad**

\* Postcode \* Municipality

\* Public Address

**Additional information of the uploader**

\* Nationality

**Documents**

\* Identification Document \* Document Number

Type of other document Other document Document number

**Place of Residence**

\* Postal Code \* Municipality \* County \* District

\* Public Address \* Type of Public Address \* House number

Building Stairway Floor Door \* Land-register reference

Other marking

\* Does the place of quarantine differ from the place of residence?  
 No  
 Yes

\* Entering relatives along with the uploader  
 No, I am entering alone  
 Yes, I am entering with relatives

Choose the following option to continue on the navigation bar on the left:

Együtt belépő személyek felvitale / Uploading other persons entering together

Your form contains the following error

1. Detailed request. Missing or incorrect value

The rest of the options will be displayed after typing the initials e.g. type letter 'u' for "utca"...etc.

Please press the button below to proceed.

**Finalize**